

Board of Public Accountants
301 South Park
PO Box 200513
Helena, MT 59620-0513
Renewal Unit
(406) 444-6880

RENEWAL APPLICATION

PAC-CPAP-LIC _____

PAC-CPAC-LIC _____

CERTIFICATE / INACTIVE PERMIT TO PRACTICE

Check For New Address.
Indicate any changes below

Renewal Fee: \$75.00

Renewal Fee if postmarked after December 31st: \$150.00

Name _____

Address _____

City _____ State _____ Zip Code _____

Country _____

The Board's primary method of communication with licensees is email. Include your preferred email address:

Email Address: _____

Check if this is a new email address

Your Montana Certificate / Inactive Permit to Practice lapses January 1st. Expiration and termination is provided by MCA 37-1-141 for failure to renew.

TO RENEW YOUR LICENSE ONLINE GO TO: eBiz.mt.gov/pol (Online transactions must be completed no later than 11:59 PM, Mountain Time on the renewal deadline date. Failure to complete the transaction by 11:59 PM will result in the addition of a late fee.)

TO RENEW BY MAIL: This form must be **complete** and postmarked by December 31st.

If you previously held a Permit to Practice and intend to reactivate your Permit to Practice, you must comply with the CPE requirements. Please contact the board office for further information.

☐ YES ☐ NO HAVE ANY LEGAL OR DISCIPLINARY ACTIONS BEEN INSTITUTED AGAINST YOU OR ANY OF YOUR PROFESSIONAL LICENSES SINCE EITHER YOUR INITIAL LICENSURE IN MONTANA OR SINCE YOU RENEWED YOUR LICENSE, WHICHEVER OCCURRED LATEST? If so, please attach copies of the document that initiated each action and all final orders. MCA 37-1-105 requires that you report this information. Failure to accurately furnish the information is grounds for denial or revocation of your license.

I hereby apply for renewal of my Certificate / Inactive Permit to Practice. I understand that I cannot offer any public accounting services to the public nor hold myself out to the public as a CPA or LPA without an Active Permit to Practice.

I hereby declare under penalty of perjury the information included in my renewal to be true and complete to the best of my knowledge.

Your signature: _____

Date: _____

DO NOT SEND CASH